

DATE OF DEPOSIT: 01/16/2001

Please type a plus sign (+) inside this box ☒
 Approved for use through 10/31/2002. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 049440-00004
 First Inventor Arthur G. Dupstadt
 Title MULTIFOCAL CONTACT LENS AND METHOD OF MAKING THE SAME
 Express Mail Label No. EK473575823US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
 See 37 CFR 1.27.
3. ☒ Specification [Total Pages 15]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 3]
5. Oath or Declaration [Total Pages 1]
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 17 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
 Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
 Box Patent Application
 Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Other:

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No.: _____ / _____

Prior application information.

Examiner _____

Group / Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

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003705

or ☒ Correspondence address below

(Insert Customer No. or Attach bar code label here)

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Name (Print/Type)	Arnold B. Silverman	Registration No. (Attorney/Agent)	22,614
Signature	<i>Arnold B. Silverman</i>		Date 01/16/2001

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 U.S. PTO

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2000</h2> <p style="font-size: small; margin: 5px 0;">Patent fees are subject to annual revision.</p>		Complete if Known	
Application Number			
Filing Date			
First Named Inventor		Arthur G. Dupstadt	
Examiner Name			
Group Art Unit			
Attorney Docket No.		049440-00004	
TOTAL AMOUNT OF PAYMENT		(\$) 454.00	

<p style="text-align: center; font-weight: bold;">METHOD OF PAYMENT (check one)</p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number: 02-2556</p> <p>Deposit Account Name: Eckert Seamans Cherin & Mellott</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p style="text-align: center; font-weight: bold;">FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <table style="width: 100%; font-size: small;"> <tr> <th>Large Entity Fee Code</th> <th>Small Entity Fee Code</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <td>101 690</td> <td>201 345</td> <td>Utility filing fee</td> <td>355.00</td> </tr> <tr> <td>106 310</td> <td>206 155</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>107 480</td> <td>207 240</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>108 690</td> <td>208 345</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>114 150</td> <td>214 75</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: right;">(\$ 355.00)</td> </tr> </table> <p>2. EXTRA CLAIM FEES</p> <p>Total Claims: 31 - 20** = 11 X Fee from below 9.00 = 99.00</p> <p>Independent Claims: 2 - 3** = 0 X 40.00 = 0.00</p> <p>Multiple Dependent: =</p> <p><i>**or number previously paid, if greater; For Reissues, see below</i></p> <table style="width: 100%; font-size: small;"> <tr> <th>Large Entity Fee Code</th> <th>Small Entity Fee Code</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <td>103 18</td> <td>203 9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>102 78</td> <td>202 39</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>104 260</td> <td>204 130</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>109 78</td> <td>209 39</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>110 18</td> <td>210 9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (2)</td> <td style="text-align: right;">(\$ 99.00)</td> </tr> </table>	Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid	101 690	201 345	Utility filing fee	355.00	106 310	206 155	Design filing fee		107 480	207 240	Plant filing fee		108 690	208 345	Reissue filing fee		114 150	214 75	Provisional filing fee		SUBTOTAL (1)			(\$ 355.00)	Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid	103 18	203 9	Claims in excess of 20		102 78	202 39	Independent claims in excess of 3		104 260	204 130	Multiple dependent claim, if not paid		109 78	209 39	** Reissue independent claims over original patent		110 18	210 9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)			(\$ 99.00)	<p style="text-align: center; font-weight: bold;">FEE CALCULATION (continued)</p> <p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Arnold B. Silverman	Registration No. (Attorney/Agent)	22,614
Signature		Telephone	412.566.2077
		Date	01/16/2001

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